## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correct maintenance fee notifica	ed below or directed ot	herwise in Block 1, by (	a) specifying a new corre	espondence address; a	ind/or (b) indicating a sepa	correspondence address as trate "FEE ADDRESS" for	
7590 09/30/2010  Robert B. Reeser, III Suite 1800 7700 Forsyth Boulevard				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
							St. Louis, MO 6
			_			(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/688,447 TITLE OF INVENTION	10/17/2003 I: PIVOTAL HANDLE I	FOR TOWABLE BAGG	Cory O. Nykoluk AGE		10759-00160	1563	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	12/30/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
MAI, TRI M		3781	190-115000	_			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			or agents OR, alternat (2) the name of a sing registered attorney or	a single firm (having as a member a new or agent) and the names of up to ent attorneys or agents. If no name is			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI TRG A	less an assignee is ident h in 37 CFR 3.11. Com GNEE CCESSORIES, Ll	ified below, no assignee oletion of this form is NO	T a substitute for filing an  (B) RESIDENCE: (CIT  St. Lo	patent. If an assignee assignment. Y and STATE OR CO Duis, MO	UNTRY)	ocument has been filed for	
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🛛 Coq	poration or other private gro	oup entity Government	
4a. The following fee(s)  Issue Fee  Publication Fee (N Advance Order -	are submitted:  No small entity discount p	permitted)	<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 012384 (enclose an extra copy of this form).</li> </ul>				
	is SMALL ENTITY state	us. See 37 CFR 1.27.			. ENTITY status. See 37 CI		
interest as shown by the	records of the United Sta	uired) will not be accepte ites Patent and Trademark	of trom anyone other than of Office.	une applicant; a regist	erea attorney or agent; or th	e assignee or other party in	
Authorized Signature	Brus	T. Atlun	<u> </u>	Date2010	0-10-06		
Typed or printed name Bruce T. Atkins				Registration No. 43476			
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